

In the Matter of,

_____, Respondent

SBI Number _____

Date of Birth _____

Superior Court of New Jersey

County _____

Petition Number _____

Complaint/Ind Number _____

**Petition for Termination of
Final Extreme Risk Protective
Order**

I _____ am the (select one) Petitioner Respondent. I ask the court for a hearing to terminate the Final Extreme Risk Protection Order.

Select one:

- Respondent no longer poses a significant danger of bodily injury to himself/herself or others
- I no longer pose a significant danger of bodily injury to myself or others

by owning, possessing, purchasing or receiving firearms and/or ammunition because:

Certification

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Date

Signature of Petitioner/Respondent